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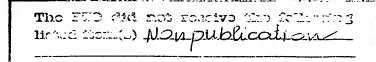
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PLANT PATENT APPLICATION **TRANSMITTAL**

L. Pernille Olesen First Named Inventor Title ROSE PLANT NAMED 'POULyc008 Express Mail Label No Ex 374 077 464 05

[Chily for New Horiprovisional applications under 57 CFX 1.55(b))									
ADDRESS T	o: Box Pa	nt Commissione tent Application							
Washington, DC 20231									
	ION ELEMENTS 600 & 1600 concerning plant pater	nt application contents	ACCOMPANYING APPLICATION PARTS						
See MPEP chapters 600 & 1600 concerning plant patent application contents. ACCOMPANTING APPLICATION PARTS									
17. CORRESPONDENCE ADDRESS									
Customer I	Number or Bar Code label (Insert ©	stomer No. or Atlach ba	code label here) or Correspondence address below						
Name	Poulsen Roser Pacific, Inc.								
Address	620 South Front Street								
City	Central Point	State	OR Zip Code 97502						
	USA 1	Telephone	(541)245-8050 Fax (541) 665-2252						
Name (Print/T)	ype) Mogens N. Ølesen	1	Registration No. (Attorney/Agent)						

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PTO/SB/17 (01-03)

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Complete if Known **FEE TRANSMITTAL** Application Number Filing Date for FY 2003 L. Pernille Olesen First Named Inventor Effective 01/01/2003. Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 1661 **Art Unit** TOTAL AMOUNT OF PAYMENT (\$) 305.00 yc008 APP Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Money Order ✔ Check Credit card Other None 3. ADDITIONAL FEES Large Entity | Small Entity Deposit Account: Fee Fee Fee Description Deposit Code Code (\$) Fee Paid 501828 Account 1051 130 2051 65 Surcharge - late filing fee or oath Number Deposit 1052 50 2052 25 Surcharge - late provisional filing fee or Poulsen Roser Pacific Account cover sheet Name 1053 130 1053 130 Non-English specification The Commissioner is authorized to: (check all that apply) 1812 2,520 1812 2,520 For filing a request for ex parte reexamination Credit any overpayments Charge fee(s) indicated below 920* Requesting publication of SIR prior to 920 1804 Charge any additional fee(s) during the pendency of this application Examiner action Charge fee(s) indicated below, except for the filing fee Requesting publication of SIR after 1805 1.840 1805 1.8401 to the above-identified deposit account. Examiner action 1251 110 2251 Extension for reply within first month **FEE CALCULATION** 1252 410 2252 Extension for reply within second month 205 1. BASIC FILING FEE 1253 930 2253 465 Extension for reply within third month arge Entity Small Entity Fee Paid Fee Fee Code (\$) Fee Fee Code (\$) Fee Description 2254 1254 1,450 725 Extension for reply within fourth month 985 Extension for reply within fifth month 1255 1,970 2255 1001 750 2001 375 Utility filing fee 1002 330 2002 165 1401 320 2401 160 Notice of Appeal Design filing fee 1003 520 2003 260 Plant filing fee 1402 320 2402 160 Filing a brief in support of an appeal 265.00 280 140 Request for oral hearing 1004 750 2004 375 Reissue filing fee 1403 2403 1451 1,510 1451 1,510 Petition to institute a public use proceeding 1005 160 2005 80 Provisional filing fee PTOTAL (4) (5) 265 00 1452 110 2452 55 Petition to revive - unavoidable

SUBTUTAL (1) (5) 205.00			Į.				
2 EVEDA CLAIM EEEE EOD LITH ITV AND DEICCH	1453	1,300	2453	650 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUI	1501	1,300	2501	650 Utility issue fee (or reissue)			
Extra Claims below Fee Paid	1502	470	2502	235 Design issue fee			
Total Claims		630	2503	315 Plant issue fee			
		130	1460	130 Petitions to the Commissioner			
		50	1807	50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806	180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$)	8021	40	8021	40 Recording each patent assignment per property (times number of properties)	40.00		
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375 For each additional invention to be examined (37 CFR 1.129(b))			
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900 Request for expedited examination of a design application			
Other fee (specify)							

(Complete (if applicable) SUBMITTED BY Registration No. Ken Rynearson Name (Print/Type) Telephone 541 245-8050 (Attorney/Agent) 29 March 2004 Signature

Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 40.00

SUBTOTAL (2)

**or number previously paid, if greater; For Reissa

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